

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
SANTA FE		REQUEST FOR ALLOWABLE			
FILE		AND			
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE		RECEIVED			
TRANSPORTER		OIL		JAN 29 1974	
GAS		1		API #30-015-21007	
OPERATOR		2			
PRORATION OFFICE					
Operator Phillips Petroleum Company					
Address Room 711, Phillips Building, Odessa, Texas 79761					
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>					
Other (Please explain) B. B. G. ARTESIA, OFFICE					
If change of ownership give name and address of previous owner					
DESCRIPTION OF WELL AND LEASE					
Lease Name Westfall-A COM		Well No. 1		Pool Name, including Formation South Carlsbad, Morrow Gas	
Kind of Lease State, Federal or Fee		Lease No. ---			
Location Unit Letter N ; 660 Feet From The south Line and 1980 Feet From The west					
Line of Section 5 Township 23-S Range 27-E, NMPM, Eddy County					
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Company		Box 84, Jal, New Mexico			
If well produces oil or liquids, give location of tanks.		Unit Sec. Twp. Rge.		Is gas actually connected? When	
				to be connected 1-31-74/2-1-74	
If this production is commingled with that from any other lease or pool, give commingling order number:					
COMPLETION DATA					
Designate Type of Completion - (X)		Oil Well Gas Well		New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.	
		X		X	
Date Spudded 11-14-73		Date Compl. Ready to Prod. 1-11-74 (perf)		Total Depth 12,050	
Elevations (DF, RKB, RT, GR, etc.) 3170.07' GR, 3188' DF		Name of Producing Formation Morrow		Tubing Depth 11,210	
Perforations 11,764'-69', 11,825'-30', 11,942'-47'				Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET	
17-1/2"		13-3/8"		392' (450 sx Class H 2%CaCl2 1/4# Flocele sx, s2)	
11"		8-5/8"		5535' (1300 sx Tri IW, 250 sx ClassH TOC at 1630')	
7-7/8"		5-1/2"		12050' (800 sx ClassH w/additives, TIC at 8060')	
		2-3/8" tbg		11210'	
TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)					
Date First New Oil Run To Tanks		Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Tubing Pressure		Casing Pressure Choke Size	
Actual Prod. During Test		Oil-Bbls.		Water-Bbls. Gas-MCF	
GAS WELL Flowing Test only - Form C-122 to be submitted as soon as test taken.					
Actual Prod. Test-MCF/D 3000/24 hr rate		Length of Test 1 hr		Bbls. Condensate/MMCF 0	
Testing Method (pitot, back pr.) flow test		Tubing Pressure (shut-in) FTP-2700		Casing Pressure (shut-in) --- Choke Size 1/2	
CERTIFICATE OF COMPLIANCE					
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					
W. J. Mueller (Signature) Senior Reservoir Engineer (Title) 1-28-74 (Date)					
OIL CONSERVATION COMMISSION APPROVED FEB 5 1974 BY W. A. Lusselt TITLE OIL AND GAS INSPECTOR This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.					